STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15)

RECEIVED

PLEASE PRINT

	JUL 2 5 2018
1. Name of Lobbyist(s) Jooi Grimbilais	NEW HAMPSHIRE
II. Name of lobbyist's partnership, firm or corporation, if any:	DEPARTMENT OF STATE
J. Grinbilas Strategic Solitores CLC. (Name of partnership, firm or corporation)	
Do Box 222 11-41 1 11H	13261
Business Address: (Street) (Town/City) (State)	(Zip Code)
PO BOX 2-33	i @ jg strutegies.co
III. This statement covers: (Choose one – file separate reports for each client, OR y reportable expense transactions which are not attributable to any one client).	you may file a separate report for
All reportable transactions occurring in the months prior to the reporting date relative	ve to the following elient:
(Full Name of Client as it appears on the Lobbyist Registration Form))
	
OR All reportable transactions by the lobbyist (including the lobbyist's family), or the lounrelated to any particular client.	bbying firm listed below which are
IV. Date of Report April 25, 2018 Reports cover: activity from date of registration to 3/31/18 July 25, 2018 activity from 4/1/18 to 6	
October 31, 2018	
V. There have been no fees received and no reportable transactions made s If this box is checked, complete just this form and submit it to the Secretary of State's Of Concord, NH 03301.	
VI. Check if additional reports are attached:	
☐ If you have received fees or made expenditures, you must file Addendum A- Fees	and Expenses
☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum Expense Reimbursement	B- Report of Honorariums or
If you, your firm, or your family has made political contributions, you must file Ad	dendum C- Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm th and complete to the best of my knowledge and belief.	
(Signature of lobbyist) 125/18	(Date)
Tooi (or indulus (Print Name of lobbyist)	